

**ARTICLE –
HEALTH BENEFITS**

Section 1. The University shall provide benefits eligible SWs, per Article ____ Benefits Eligibility, health, mental health, dental, vision care, and prescription drugs with no premiums or fees.

- A. SWs with benefits eligibility at the start of their appointment will be automatically covered on the effective date of an appointment.
- B. For salaried or stipended SWs with a one-year appointment or less, coverage shall be for the duration of at least two full plan terms, so long as they remain enrolled at the University.
- C. For salaried or stipended SWs with an appointment of more than one year, the coverage shall be for the duration of at least two full plan terms per year of appointment rounded up, so long as they remain enrolled at the university.
- D. For hourly SWs who qualify through the annual threshold as per Section 1 B of Article ____ Benefits Eligibility, coverage shall be for the duration of at least two full plan terms per yearly threshold, so long as they remain enrolled at the University.
- E. For hourly SWs who qualify through the semester or summer term threshold as per Section 1 C of Article ____ Benefits Eligibility, coverage shall be for one full plan term per term threshold, so long as they remain enrolled at the University.
- F. SWs who receive coverage after the start of a plan term will be fully reimbursed by the University for their insurance premiums which cover the period of the current plan term, up to the full cost of the Plan. SWs shall also be reimbursed for the difference in any out-of-pocket costs they incurred during the plan term prior to coverage.

Section 2. The University shall waive or reimburse the Student Health Fee and all other fees related to HUHS for all benefits eligible SWs for the duration of the plan term in which the SW is eligible.

Section 3 4. Health, mental health, dental, vision care, and prescription drugs for eligible dependents shall be provided and the University shall pay 100% of all premiums and fees for the same duration of coverage as defined in Section 1. Eligible dependents include but are not limited to spouse, domestic partner (regardless of gender identity or sex) and/or children of benefits eligible SWs. Benefits for covered dependents shall be equivalent in all respects to those provided to the SW.

Section 4. Nothing in this Agreement shall affect the University's right to modify the Harvard University Student Health Insurance Plan (SHIP) or plan design or premium rates or to change insurance carriers or administrators. However, for benefits eligible SWs, there shall be no reduction of benefits for the duration of this contract. Should any modifications to the plan result in a reduction of benefits, relative to the SHIP as of September 1, 2019, for benefits eligible SWs the University shall promptly reimburse the difference in cost to SWs, including but not limited to any premium, copayment, coinsurance, deductible, or out-of-pocket cost incurred by SWs.

Section 5. The University agrees to work towards improving access to mental health care, improving access to specialist care, and improving access to care for transgender individuals. As such, for all benefits eligible SWs and their dependents the university shall ensure the following:

- A. SWs shall be promptly reimbursed for all costs incurred for any number of visits for in-network mental health care, including any copayments, coinsurance, or out-of-pocket costs.
- B. SWs shall be promptly reimbursed for all costs incurred for any number of medically approved in-network specialist visits, including any copayments, coinsurance, or out-of-pocket costs exceeding \$35.00 per visit.
- C. SWs shall be promptly reimbursed for any costs incurred for trans/gender affirmation medical treatments, including office visits, prescriptions (including hormones), laboratory tests, and gender confirmation surgeries.
- D. In no case shall SWs be required to pay more than the out-of-pocket maximum specified in the SHIP as of September 1, 2019.
- E. Where the SW learns of the costs covered under this Section and notifies the University in advance, the University shall cover the SW's medical costs in advance.

Section 6. A Joint University-HGSU-UAW Health Care Taskforce with an equal number of representatives of the University and the Union shall be established. The Health Care Taskforce shall begin meeting regularly no later than one (1) month after ratification of this Agreement, and shall confer regularly with mutually agreed-upon experts in the area of health care policy, health economics, and health promotion/wellness as well as mutually agreed-upon representatives of other stakeholders in the SHIP. On an ongoing basis, the Health Care Taskforce shall review data concerning:

- A. The trend in Harvard's total active plan health care expenditures in recent years;
- B. The sharing of health care costs between the University, SWs, and students as well as the distribution of costs among groups at different income levels;
- C. Trends in medical claims among the HGSU-UAW membership.

The Health Care Taskforce will be charged with discussing and resolving the following questions and issues:

- A. Active plan copayments, deductibles, and out-of-pocket maximums;
- B. Annual review of the methodology used to set new premium rates and analysis of any surplus or deficit in the University's health premium accounts; and
- C. Exploration of potential union-management projects to reduce total health care cost, as well as the question of how the benefits of any resulting cost reduction will be shared between the University and SWs.

Section 7. SWs covered under this Agreement shall be eligible to participate in any of the optional Dependent or Supplemental Life Insurance or Accidental Death and Dismemberment programs offered to other University employees.